

Prince George's County Intended Use Plan

***Prince George's County Projects for Assistance in Transition from
Homelessness (PATH) Intended Use Plan
Federal Fiscal Year 2010 (State FY 11)***

1. Provide a brief description of the provider by organization receiving PATH funds including name, type of organization, services provided by the organization and region served. The Department of Family Services, Mental Health and Disabilities Administration (DFS/MHADA), the Core Service Agency (CSA) for Prince George's County, proposes to award the Federal PATH funds to Quality Care Internet Behavioral Health (QCI), a Limited Liability Partnership with office headquarters in Prince George's County. QCI is the current provider of PATH services in Prince George's County. In addition, QCI receives a grant to provide Mental Health Outreach Services to homeless individuals with mental illnesses. QCI is Maryland-approved as an Outpatient Mental Health Center (OMHC), Mobile Treatment Program, and Psychiatric Rehabilitation Program. QCI will make PATH services available throughout Prince George's County. In addition to QCI the Department proposes to award \$56,374 to the Prince George's County Department of Social Services to provide a Stepping Stones to Recovery (SOAR) Outreach Specialist position to assist eligible consumers with Supplemental Security Income (SSI) and Social Security Disability Income (SSDI) applications.

Prince George's County covers almost 500 square miles, and is the most densely populated County in Maryland. It is estimated that the population of the County is 828,770, with residents constantly facing the risk of homelessness now more than ever. The increase in risk of homelessness is believed to be largely due to the recent financial crisis experienced nationwide. This County has seen a constant increase in street homelessness. Homelessness is not confined to any particular area within the County, and can be identified in both rural and urban areas. Based on the 2009 Point in Time Survey, (which shows how many individuals are homeless on the street, done in one day in January) there are an estimated 1,200 homeless individuals in Prince George's County.

2. Indicate the amount of PATH funds the organization will receive.

Prince George's County Department of Family Services will receive \$119,264 in PATH funds. Prince George's County Department of Family Services will award QCI \$62,872 in funding and Prince George's County Department of Social Services \$56,392 in funding to provide a SOAR specialist position.

3. Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients including:

a. The projected number of enrolled clients who will receive PATH-funded services in Federal Fiscal Year (FFY) 2010. Indicate what percentage of clients served with PATH

funds are projected to be "literally" homeless (i.e. living outdoors or in an emergency shelter rather than at imminent risk of homelessness).

The PATH Program will provide outreach to 140 homeless individuals. 110 individuals will be enrolled in the PATH program as follows:

- * QCI will enroll 80 individuals of which 85% will be literally homeless.
- * Department of Social Services will enroll a minimum of 30 individuals of which 100% will be literally homeless.

b. List services to be provided, using PATH funds. The program will be staffed with part-time services from the CEO, one full-time Program Director, one part-time Housing Specialist, and one part-time Community Assistant.

The CEO provides:

- Supervision and Administrative Oversight
- Fiscal Management

The Program Director's responsibilities are:

- Program Oversight
- Annual, Quarterly and Monthly Report submission
- Outreach, screening, assessment and referral
- Client/Tenant Rights Advocacy
- SOAR Project Training
- HMIS Training

The Housing Specialist responsibilities are:

- Case Management/Supportive services
- Outreach, screening, assessment and referral
- Assisting consumers to apply for entitlements and housing
- Assisting with transportation
- Relevant consumer advocacy activities

All program staff will provide including the Community Assistants responsibilities which is filled with a consumer of mental health services:

- Referrals to Crisis Mental Health Services
- Housing services (up to 20% of the grant award) to include, but not limited to security deposits, one-time rental payments to prevent eviction, planning for housing and technical assistance in applying for housing assistance.
- Referrals for Mental Health and Medical treatment
- Referrals for Habilitation and Rehabilitation services
- Referrals for Vocational Training

The SOAR Specialist responsibilities are:

- Assist PATH program participants with completing SSI and/or SSDI applications using the SOAR process
- Coordinate a minimum of two SOAR trainings
- Provide outreach to homeless persons and to agencies serving homeless individuals

- Provide technical assistance and follow up to SOAR trained case managers
- Track and report progress of all SOAR applications on behalf of Prince George's County citizens
- Promote public policies and practices that facilitate eligibility determination
- Coordinate and lead monthly or quarterly SOAR meetings with SOAR trained providers and case managers in Prince George's County

- c. **Community organizations that provide key services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible clients and describe the coordination with those organizations.** QCI will participate in several committees in Prince George's County that serve homeless individuals with mental illnesses including the Homeless Partnership, and the Quality Improvement Interagency Committee. QCI will provide referral information as well as assistance with applying for needed services such as those listed below.
- Department of Family Services, Mental Health and Disabilities Administration, the CSA for Prince George's County.
 - Community Crisis Services, the Prince George's County Hotline.
 - Community Ministries Warm Nights program provides shelter during the winter months for homeless individuals.
 - Psychotherapeutic Services of Southern Maryland, the Targeted Case Management program.
 - The Prince George's County Department of Social Services (DSS), provides various programs from which homeless individuals can benefit.
 - Prince George's County Crisis Response System responds to individuals experiencing psychiatric crises.
 - The Safe Journey House provides Residential Crisis services to individuals who are experiencing psychiatric crises.
 - The Prince George's County Transitional Center, men's homeless shelter.
 - Volunteers of America, Chesapeake, Inc. operates the Shelter Plus Care program.
 - The Prince George's County Department of Housing and Community Development operates programs to assist individuals to obtain affordable permanent housing.
 - Rehabilitation Systems, Inc. operates a HUD Homeless program.
 - The Children and Parents Program (CAP), mental health and addictions services for parents of small children and parents to be.
 - The QCI Homeless Outreach program provides outreach and case management to individuals with mental illnesses who are homeless.
 - Local Thrift Stores within Prince George's County, provide second hand items at affordable prices.
 - The Family Emergency Shelter provides shelter for individuals and families in need.
 - Mission of Love Church, assists homeless or at risk individuals with obtaining food, furniture and clothing.
 - The Salvation Army provides a number of services to the homeless.

- Laurel Advocacy and Referral assists homeless individuals with obtaining shelter, food and other needed services.
 - Shepherd's Cove provides shelter for homeless women and children.
 - Uniting Communities Against Poverty (UCAP) provides housing to homeless families
 - The Café local soup kitchen that provides lunch for individuals and families that need the assistance.
 - People Encouraging People, provides Assertive Community Treatment (ACT) to individuals and families.
 - SOAR Workgroup Meeting, to assist and provide ongoing support to SOAR providers in the application process.
- d. **Gaps in current service system.** One of the major areas of concern with the current service system in Prince George's County is limited housing options for homeless mentally ill persons. Other than PATH funded services, the Shelter Plus Care program and the HUD supportive housing programs, there are no other housing programs dedicated to serving the homeless mentally ill population in Prince George's County. Additionally, there is a tremendous need in the County for treatment services designed to serve individuals with co-occurring disorders; mental illness and substance abuse.
- e. **Services available for clients who have both a serious mental illness and substance use disorder.** QCI refers individuals to the Children and Parents Program (CAP), a part of the Prince Georges' County Health Department, which provides mental health clinic services to parents who have co-occurring mental illnesses and substance abuse disorders. In addition, CAP has access to residential facilities which provide substance abuse counseling and mental health services for eleven men and six women. QCI assists individuals with co-occurring disorders by referring to 12-Step Programs, Assertive Community Treatment and other support groups. QCI has also works with Reality Treatment Centers in Laurel, which provides Alcohol and Drug Treatment. We are able to give individuals who require mental health treatment services in house, as they go through their alcohol and/or drug treatment. We have also began to work with Oxford House and Price House, which are local halfway houses in PG County.
- f. **Strategies for making suitable housing available to PATH clients, (e.g., indicate the type of housing usually provided and the name of the agency that provides such housing).** Homeless mentally ill individuals are assisted with locating rental-housing options through the QCI Behavioral Health PATH private provider-housing list. Individuals are also assisted with applying to a variety of residential programs and can be referred to one of the County shelters until appropriate housing is secured through the Homeless Hotline. In addition, one of the PATH staff persons is a licensed Real Estate agent with access to the Realtor Multiple Listing Service (MLS). QCI also depends on an informal network, which provides word of mouth leads on multiple properties. Staff meets and negotiates with

property owners who have an interest in converting or utilizing their properties for suitable housing for the homeless. The PATH staff also obtains leads from the Homeless Services Partnership, The Quality Improvement Interagency Committee, and SOAR Workgroups which consists of providers of services to the mentally ill and homeless persons.

4. Describe the participation of PATH local providers in the HUD Continuum of Care Program and any other local planning, coordinating or assessment activities. Both the Department of Social Services and QCI participate in the Homeless Partnership with the Department of Social Services taking the lead role in the HUD Continuum of Care for the County. Most of the HUD Continuum of Care programs make referrals to the PATH program on behalf of homeless persons with mental illnesses, while providing other necessary services. The PATH Director is maintaining positive, lasting relationships and working closely with current referral sources to coordinate services, and is also always searching for new sources. In addition, homeless persons with mental illnesses are often identified through the Homeless Outreach program, which is also operated by QCI. In an attempt to reduce homelessness of patients discharged from local community hospitals, clients are referred directly from the hospitals to the QCI PATH program. Homeless mentally ill individuals are assisted with locating rental-housing options through the QCI PATH private provider housing list or they are referred to one of the County shelters until appropriate housing options are identified. Clothing and furnishings are obtained through the Mission of Love Church, Salvation Army, and local thrift stores, and individuals in the community who donate needed items to homeless individuals who are attempting to furnish their new residences. In addition, the PATH staff coordinates with food pantries and soup kitchens to obtain basic food items for individuals receiving services through the PATH program. PATH staff attends the Quality Improvement Interagency Committee Meeting (QIIC) where Residential Rehabilitation Program (RRP) provider representatives assist the PATH program in providing residential placement alternatives for homeless persons with mental illnesses. In addition, QCI's PATH program is a part of the Homeless Partnership, which includes most of the members of the HUD Continuum of Care. As a part of its mission the Homeless Partnership works to identify and implement strategies to end homelessness. PATH staff are also regular participants in the Annual Point in Time Survey, which identifies the number of individuals who are homeless in the County on a given day; the County's 10 year Plan to End Homelessness; Co-occurring Committee, who plan for meeting the needs of County residents who live with co-occurring mental illnesses and substance abuse disorders; Homeless Service Partnership, meeting to brainstorm ideas and resources the County needs for to better service our homeless population; and SOAR Workgroups, which meet monthly to discuss SOAR cases and assist providers with the SOAR application process. QCI also participated in the Prince George's County Resource Day Planning Committee, which met to brainstorm ideas for the upcoming resources day in Sept. 2009, last year was the first year and it was very successful.

5. Describe: (a) the demographics of the client population; (b) the demographics of

the staff serving the clients; (c) how staff providing services to the target population will be sensitive to age, gender, and racial/ethnic differences of clients; and (d) the extent to which staff receive periodic training in cultural competence. (a) The client population of QCI is diverse and reflects the demographics of the County. The demographics of Prince George's County are approximately 65.5% individuals of African ancestry, 28.3% Caucasian, and 18.4% other ancestries, with an increasing Hispanic population. (b) QCI has a diverse staff, which is representative of the County, and includes African Americans, staff from African countries, women, men, Caucasians, Hispanic, and bi-lingual members. QCI staff, because of the diverse backgrounds, is sensitive to the many age, gender, ethnic, cultural and religious differences represented in the Prince George's County community.

(c) QCI staff has had and will continue to receive training in cultural competency. Such training can also be made available to PATH consumers as a tool to help them confront effectively the stigma of mental illness and other roadblocks associated with obtaining housing. QCI has also received training offered by the Mental Hygiene Administration and the Anti-Stigma Project. (d) QCI plans to seek out and continue to engage in ongoing training opportunities offered by the Mental Hygiene Administration, the Core Service Agency, as well as many other institutions and private providers.

6. Describe how persons who are homeless and have serious mental illnesses and any family member will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. Also, are persons who are PATH-eligible employed as staff or as volunteers? Do persons who are PATH-eligible serve on governing or formal advisory boards? Consumer and family participation is strongly encouraged. The QCI Advisory Board is made up of seven (7) individuals. Homeless consumers and/or family members make up one fourth of the QCI Advisory Board. Three (3) of the board members are from the community at large, two (2) are mental health professionals and two (2) are QCI Behavioral Health staff. The PATH program includes a Community Assistant who is required to be a consumer of mental health services and to have been homeless. Ongoing Consumer Satisfaction Surveys are conducted to provide feedback on PATH services. The housing needs of PATH consumers are integrated into the development of a "circle of support", including QCI, PATH, and clinical mental health providers, family, friends, and others. Additionally, QCI follows the Assertive Community Treatment and Mobile Treatment models of service, and these include consumer and family having active roles in the treatment process.

7. Provide a budget narrative that provides details regarding PATH Federal and match (i.e., State and local) funds.

POSITION	ANNUAL SALARY	PATH FUNDED FTE	PATH FUNDED SALARY	TOTAL
Position #1	\$48,880	1.0	\$25,200	\$25,200
Position #2	\$45,760	.5	\$ 9,000	\$ 9,000
Position #3	\$72,000	.26	\$9,600	\$9,600
Position # 4	\$20,800	.5	\$15,272	\$15,272
Position # 5 (SOAR)	\$45,000	1.0	\$38,000	\$38,000
Fringe			\$10,800	\$10,800
Travel			\$ 240	\$ 240
Equipment			\$ 3,500	\$ 3,500
Office Space			\$ 1,800	\$ 1,800
Supplies			\$ 1,852	\$ 1,852
Housing Assistance			\$ 4,000	\$ 4,000
Contractual				
Construction				
Other Services				
TOTALS	\$241,424		\$119,264	\$119,264

8. Indicate at least three outcome goals you will use to measure the effectiveness PATH funded services (State Requirement).

- The PATH Program will serve a minimum of 80 consumers;
- Maintain a listing of at more than 30 landlords;
- 40% of intakes will be placed in housing; however we will to make every attempt to not leave any individual on the streets;
- 100% of individuals that need to do so will make applications for entitlements;
- 60% of clients will be linked to housing and will remain in housing for six months or more;
- QCI will conduct 5 or more PATH community education sessions in FFY 2010;
- QCI provide technical assistance/support to clients with purchase of permanent housing when it is requested;
- 80% of consumers and referring agencies will indicate satisfaction with services.
- A minimum of 30 SSI/SSDI applications will be submitted using the SOAR Process
- A minimum of two (2) SOAR trainings will be presented in Prince George's

County.

- At least 30% of the SSI/SSDI applications using the SOAR process will be approved.

Somerset County Intended Use Plan

***Wicomico Somerset Regional Core Service Agency
Project for Assistance in Transition from Homelessness (PATH)
Intended Use Plan for Somerset County
Federal Fiscal Year 2010 (State FY 11)***

1. Provide a brief description of the provider by organization receiving PATH funds including name, type of organization, services provided by the organization and region served.

The Wicomico Somerset Regional Core Service Agency (CSA) of the Wicomico County Health Department (WiCHD) will be the provider of PATH funds for Somerset County. CSA's in Maryland are the local mental health authorities responsible for planning, managing, and monitoring public mental health services at the local level. The Wicomico Somerset Regional CSA oversees the Shelter Plus Care Supportive Housing Program for both Somerset and Wicomico Counties. In addition, the Wicomico Somerset CSA coordinates and chairs the Homeless Coalition for Wicomico County and is an active member of the Tri-County Alliance for the Homeless Continuum of Care (CoC) Committee for Wicomico, Somerset, and Worcester Counties. Furthermore, the Wicomico Somerset Regional CSA has taken the lead in coordinating a SOAR initiative for the three lower counties of the Eastern Shore including Somerset, Wicomico and Worcester Counties.

The PATH funds will assist all eligible residents of Somerset County. This county is located on the rural Lower Eastern Shore of Maryland. Somerset County is the southernmost county in Maryland with total area of 611 square miles, of which, 327 square miles of it is land and 284 square miles of it (46.4%) is water. Somerset County is ranked as the 2nd smallest out of 24 counties in terms of population for the State. The estimated 2009 total population for the county is 25,959 (www.census.gov). According to the 2008 Census update, persons below the poverty level for Somerset County is 23.1%, well over that of the state as a whole, which is 8.2%.

In state Fiscal Year 2009 MAPS-MD reports the number of individuals receiving public mental health services to be approximately 998 individuals in Somerset County. These numbers include only Medical Assistance (MA) recipients and eligible uninsured individuals and not those receiving services under Medicare and private insurance.

The Tri County Alliance for the Homeless Continuum of Care Committee (CoC) conducts a point-in-time homeless survey every other year. The last survey was conducted January 2009. Results revealed a total homeless count of 79 individuals from Somerset County.

2. Indicate the amount of PATH funds the organization will receive.

The CSA will receive \$10,000 in Federal PATH funds. See attached budget sheet.

3. Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients including:

- a. **The projected number of enrolled clients who will receive PATH-funded services in Federal Fiscal Year (FFY) 2009. Indicate what percentage of clients served with PATH funds are projected to be "literally" homeless (i.e. living outdoors or in an emergency shelter rather than at imminent risk of homelessness.)**

The SCHD plans to serve a minimum of 6 enrolled clients in FFY 2010, with approximately 3 enrolled clients being literally homeless.

- b. **List services to be provided, using PATH funds.**

PATH funds received by the SCHD will be used to **partially** fund one staff for 5 hours a week to provide outreach, case management services, and staff training.

Outreach will be provided to the local homeless programs including, but not limited to, the Christian Shelter, the Wood Home Transitional Housing Program, the Community Emergency Shelter Program (CESP), and the CODE BLUE Winter Program. Outreach will include educating both clients and staff on community resources, including education about the SOAR model.

Case management services will be available to PATH eligible individuals in Somerset County. Services will entail assessment and service planning, linkages of the participant with needed services, monitoring of service provision and advocacy. Services needed may include referral to mental health providers, psychiatric rehabilitation programs, housing, food, medical follow up, and evaluations for employment. Intensive case management will locate services, advocate for the clients, and follow them to ensure their success in the community. When possible the SOAR initiative will be implemented.

Staff training will be provided to local agencies working with the individuals who are homeless. This includes the training of individuals who work in shelters, mental health clinics, substance abuse programs, and other sites where homeless individuals require services.

Individuals who need financial assistance for security deposit or arrears in rental payments will be referred to the Wicomico Somerset Regional Core Service Agency for assistance through their Consumer Support Program.

- c. **Community organizations that provide key services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible clients and describe the coordination with those organizations.**

The Targeted Case Management Program is currently provided by the Somerset County Health Department (SCHD). These services are offered to those who are chronically mentally ill and require assistance in daily life skills and community living.

SCHD also offers Shelter Plus Care Housing – rental assistance to mental health consumers, of

which at least 50% of them have a forensic background.

SCHD's Behavioral Health Division offers outpatient and intensive outpatient addictions counseling, dual diagnosis counseling, and an employment program to all Somerset County residents who are enrolled in their substance abuse treatment program.

Chesapeake Behavioral Health, a Division of Three Lower Counties, Inc. (TLC) offers outpatient mental health counseling to children and adults. The Three Lower Counties also provides primary medical and dental care to our homeless population.

Go-Getters, Inc. operates the only residential rehabilitation program in our county. This organization offers advocacy, therapy, med management, case management, psychiatric rehabilitation (PRP), supported employment, and some limited housing to mental health consumers.

Eastern Shore Psychological Services (ESPS) is a mental health provider. They offer outpatient therapy and medication management to adults as well as to children.

The Wicomico Somerset Regional Core Service Agency (CSA) has limited funding available to those individuals who are mentally ill and are in need of support services. CSA consumer support funding is utilized as a last resort.

The Seton Center Catholic Charities offers a health and wellness program, a children's program, supplementary and emergency food programs, women's groups, pastoral outreach, and access to their thrift store. The Seton Center also has limited funds to assist county residents with paying utility and heating bills when the client is at risk of being disconnected, and purchasing medications when they are not eligible for any type of pharmacy assistance.

The Goodwill Industries of the Chesapeake offers assistance with clothing and household items. They also have a career development program that is available to the consumers of Somerset County.

Shore Up! is a non-profit community action organization. Services include energy assistance, vocational training, personal care aide services, and an adult medical day care program.

Somerset County's Department of Social Services offers family services, cash assistance to those with children, food stamps, medical assistance, homeless services on a limited basis, vocational services through their Work Opportunities Program, education, and support groups.

Division of Vocational Rehabilitation Services are offered to Somerset County residents and include: job training, assessment of skills, job placement, and sheltered workshop experience and assessment.

ConMed Healthcare, Inc. provides services to the incarcerated mentally ill consumers in the County. A grant from MHA funds the program. ConMed provides psychiatric screening,

evaluation, medication monitoring, crisis intervention, advocacy, case management, and aftercare planning.

The Tri-County Alliance for the Homeless is a supportive permanent housing program serving the disabled and homeless residents of Somerset, Wicomico and Worcester Counties. Case managers work directly with the homeless to identify the specific challenges they may face and help them work through the barriers/challenges to obtain permanent housing. The program additionally provides security deposits and ongoing rental assistance to 19 Somerset County residents.

d. Gaps in current service system.

Some of the gaps in services that have been identified in Somerset County include: lack of money for mental health counseling when the consumer does not qualify for uninsured benefits through Maryland's Public Mental Health System, the consumer's income exceeds eligibility criteria for the Primary Adult Care program, or the consumer's health insurance does not cover the service; application fees for housing, temporary/emergency housing and security deposits; money for psychotropic medication while clients are awaiting pharmacy assistance approval; money for housing start-up needs and/or clothing; money for transportation to activities that medical transport does not fund; and money for transportation to doctor appointments for those who do not receive medical assistance. A problem that our County and many other rural areas face is client's non-compliance with services, secondary to the lack of resources available for the clients. Because of these gaps in service, outreach is an essential component of any program.

e. Services available for clients who have both a serious mental illness and substance use disorder.

The SCHD Behavioral Health Division has a co-occurring program funded through the Maryland Health Commission for adolescents and adults utilizing telepsychiatry. This integrated co-occurring treatment is established through collaborative relationships with the Somerset County mental health providers. Clients who meet the requirements will be referred. Additionally, this program has telepsychiatry services available to clients who are not able to obtain an initial appointment with Somerset County mental health providers within 30 days. Clients will also be encouraged to attend local NA and AA meetings.

The local inpatient provider for Somerset County is Hudson Health Services, in Wicomico County. Hudson Health Services will provide some mental health services during inpatient stay. Most of the community services offered to the mentally ill are also available to the dually diagnosed with the exception of those actively using who are unable to access the local shelters. Case management will locate services, advocate for the clients, and follow them to ensure their success in the community.

f. Strategies for making suitable housing available to PATH clients, (e.g., indicate the

type of housing usually provided and the name of the agency that provides such housing).

The availability of affordable housing is inadequate in Somerset County; however, a relationship has already been established with the CSA staff and several landlords in the community. Sometimes the landlord will contact us when they have a vacancy. There are several low-income HUD subsidized housing projects in the Crisfield and Princess Anne areas. Staff will have access to low-income housing lists, which specifies type of housing and estimated rental price. In addition, Go-Getters, Inc. has two residential rehabilitation houses in Somerset County, with six beds available to those who qualify for their program. PATH clients will also be referred to the Shelter Plus Care Rental Assistance Program, HUD's Housing Choice Voucher Program, Tri-County Alliance for the Homeless Housing Program, the Bridge Subsidy Program and to local individual landlords.

Much of the affordable housing in Somerset County is in high crime and drug traffic areas making recovery difficult for the consumers. Being a small area some consumers have "burnt bridges" and this adds to the degree of difficulty in finding places. Advocating for clients or promoting linkage to other services sometimes makes landlords more receptive to give consumers a second chance.

4. Describe the participation of PATH local providers in the HUD Continuum of Care Program and any other local planning, coordinating or assessment activities.

The CSA is a member of the Tri County Alliance for the Homeless Continuum of Care Committee (TCAH CoC). The CSA chairs the Monitoring Sub-Committee of the CoC, and also chairs the CoC's SOAR initiative workgroup. The TCAH CoC meets monthly and is comprised of county homeless boards, multi-agency representatives, consumers, and family members of consumers which collaborate to address issues of the homeless population. The SCHDs Behavioral Health Division Director is the lead contact person for the planning and submission of the TCAH CoC HUD application.

Additionally, as mentioned previously, the CSA oversees the Shelter Plus Care Supportive Housing Program for Somerset County.

5. Describe: (a) the demographics of the client population; (b) the demographics of the staff serving the clients; (c) how staff providing services to the target population will be sensitive to age, gender, and racial/ethnic differences of clients; and (d) the extent to which staff receive periodic training in cultural competence.

Data from the January 2009 homeless point in time survey indicate the demographics of the homeless population of Somerset County is as follows: 37% Caucasian, 54% African American, 3% Hispanic, 3% Native American, and 3% Other. For gender and age, 60% were female with an average age of 33, and 40% were male with an average age of 42.

Additional data from the survey indicate that the top three reasons for homelessness are

unemployment, unable to pay rent/mortgage, and alcohol/drug abuse. Furthermore, the biggest service needs identified by the survey participants included affordable housing, employment, addiction treatment, and entitlements.

The CSA is a program within the Wicomico County Health Department which promotes Cultural Competency and has a Cultural Competency Committee. All Health Department employees are required to attend workshops and complete trainings on Cultural Competency. These trainings are particularly important as the current PATH staff serving the clients is Caucasian.

Staff will learn and become familiar with the client's culture, including the environment the client lives in, where and how the client was raised, and the norms and traditions of that client's family. The CSA also recognizes consumer strengths, and works to build collaborative, respectful partnerships with natural helpers, such as the consumer's family members and friends.

6. Describe how persons who are homeless and have serious mental illnesses and any family member will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. Also, are persons who are PATH-eligible employed as staff or as volunteers? Do persons who are PATH-eligible serve on governing or formal advisory boards?

PATH eligible consumers and family members serve as voluntary members of the TCAH CoC. The CoC is integrally involved in the design, implementation and evaluation of homeless services at all levels across the region. There are currently no consumers employed as PATH staff or volunteers.

7. Provide a budget narrative that provides details regarding PATH Federal and match (i.e., State and local) funds.

POSITION	ANNUAL SALARY (includes PATH Salary)	PATH FUNDED FTE	PATH FUNDED SALARY	TOTAL
CSPHS IV, MH	\$52,436	0.125	\$6,493	\$6,493
Homeless Outreach	\$0		\$0	\$0
Fringe (25%)	\$0		\$3,507	\$3,507
Travel	\$0		\$0	\$0
Equipment	\$0		\$0	\$0
Supplies	\$0		\$0	\$0
Contractual	\$0		\$0	\$0
Construction	\$0		\$0	\$0
Other/Training	\$0		\$0	\$0
Total Direct Costs	\$52,436		\$10,000	\$10,000
Indirect Cost	\$0		\$0	\$0
TOTALS	\$52,436		\$10,000	\$10,000

8. Indicate at least three outcome goals you will use to measure the effectiveness PATH funded services (State Requirement).

During FFY 2010:

- 1) Case management services will be provided to 6 enrolled PATH consumers.
- 2) 75% of enrolled PATH consumers not linked to mental health service will be referred to community mental health services and keep their first appointment
- 3) Outreach services will be provided monthly to individuals staying in local homeless shelters. Outreach will also include increasing awareness about the SOAR initiative.
- 4) Staff training will be provided to at least 6 local referring agencies to increase awareness and educate staff about available services, including the SOAR initiative, for individuals that are homeless and chronically mentally ill.

**St. Mary's County
Intended Use Plan**

St. Mary's County Department of Human Services
(Federal Fiscal Year 2010 Projects for Assistance in Transition from Homelessness)
PATH
(State Fiscal Year 2011)

INTENDED USE PLAN

1. Provide a brief description of the provider organization receiving PATH funds including name, type of organization, services provided by the organization and region served.

The St. Mary's County Department of Human Services (DHS) a local government entity, acting as the Core Service Agency in St. Mary's, will receive PATH funding and subsequently contract with vendors to provide the services identified in the plan. In conjunction with Maryland's Mental Hygiene Administration the DHS manages the Public Mental Health System in St. Mary's County and responds to the needs of the community system through planning, implementation and evaluation of resources and programs. The DHS utilizes a blend of federal, state and local funds to ensure that the continuum of care for the chronically homeless/mentally ill is accessible and responsive.

In St. Mary's County, citizens face significant accessibility and availability issues for such needs as mental health, addictions and affordable housing. St. Mary's County is located in Southern Maryland on a peninsula formed by the confluence of the Potomac and Patuxent Rivers and the Chesapeake Bay, 60 miles SE of Washington, D.C., and 90 miles south of Baltimore. It is 361 square miles in size and shares borders with Charles and Calvert Counties. St. Mary's may be considered a rural county; however, it is a county in transition. The Census Bureau reports a 17.8% growth in population between April 2000 and July 2008, and since that time housing developments have continued to burgeon to meet the needs of one of the fastest growing counties in Maryland. Statewide, Maryland has about 542 persons per square mile; St. Mary's County has approximately 238. St. Mary's County citizens face the challenges that distances impose on social networks and service systems, such as isolation and transportation problems.

When St. Mary's County was named Maryland's second Technology Corridor several years ago, its identity as a rural county in transition was complete. The Patuxent River Naval Air Station continues to serve as the Navy's principle research, development, test, evaluation, engineering and support site, employing over 30,300 military personnel, civil servants and defense contractors. The Air Station is a major economic engine that contributes to steady population and job growth. A culture once dominated by agriculture is now dominated by the defense industry. The Naval Air Station attracts highly skilled and paid personnel, who have absorbed most of the housing stock and driven up rental costs.

The 2008 U.S. Census Bureau Quick Facts estimated 101,578 persons were living in St. Mary's County; 80.6% of which were White, 14% were African American, and 2.9% were Hispanic. The per capita income is estimated at \$22,662. The median family

income is estimated at \$77,703. It is reported that 7.4% of the County's population lives below poverty level and it is estimated that 8.7% of the population is disabled. Both of these numbers rate closely to the Maryland averages at 8.2% and 6.6% respectively. St. Mary's maintains a higher percentage of people living in poverty and the lowest per capita income in comparison to its bordering jurisdiction Calvert and Charles Counties.

With a population of approximately 12,771, the town of Lexington Park was designated a Micropolitan Statistical Area in the 2000 census. It is much more heavily populated than other areas and towns, including the County seat of Leonardtown, which has a population of approximately 2,214. Lexington Park is the most urbanized area of St. Mary's County and it is where most of the low-income housing and low wage jobs are located. Lexington Park was at one time designated a special Hot Spot area for increased law enforcement and human service integration due to its crime rate and other social problems. This continues to be where many public mental health consumers live and were the highest concentration of homeless individuals are outreached.

Homelessness is a pervasive problem in St. Mary's County. The exact number of individuals living without stable housing in the jurisdiction is almost impossible to know, but according to the 2009 HUD Point in Time Survey, it is estimated that 1,198 individuals are homeless on any given night in Southern Maryland. From a recent needs assessment in the community we found the most pressing issues continue to be a lack of affordable housing, homelessness, transportation and access to behavioral health care. We anticipate these issues will continue to be paramount in FY 2011.

Currently, outpatient mental health services in the jurisdiction are primarily provided by two public mental health clinics and three private practices, one of which only serves third-party insurances. Recruitment and retention of qualified mental health professionals continues to be extremely difficult as reported by providers. In 2009, the DHS obtained a renewed five year geographical designation as a federal shortage area in psychiatry as well as new designation as a federal shortage area for mental health professionals.

2. Indicate the amount of PATH funds the organization will receive.

The St. Mary's County Department of Human Services, acting as the Core Service Agency, will receive \$45,950.00 in federal PATH funding in FY 2011.

3. Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:

- a. The projected number of enrolled clients who will receive PATH funded services in FFY10. Indicate what percentage of clients served with PATH funds are projected to be "literally" homeless (i.e., living outdoors or in an emergency shelter rather than at imminent risk of homelessness).**

It is anticipated that a minimum of 120 clients will be served using PATH funds in FFY2010. Of these, we estimate that over 50% will be “literally homeless, with the majority of the remainder considered at imminent risk for homelessness.

b. List services to be provided, using PATH funds.

PATH funding will continue to support two critical service components for the homeless/mentally ill population. First, homeless outreach will be provided through an agreement with the Three Oaks Center, which is our largest homeless service provider in St. Mary's and is located in Lexington Park, MD. It is anticipated that 75 individuals will be enrolled in PATH via outreach. Those served through the Three Oaks Center will receive case management, including referrals for primary health and mental health services, job training, educational services and housing assistance. Those PATH-enrolled clients will also receive supportive services in their residential setting, including screening and diagnostic services, community mental health and substance abuse treatment services and representative payee services if needed. Second, PATH will fund a portion of our local Correctional Mental Health Service in the St. Mary's County Detention Center. We expect that 45 individuals will be served there in FFY 10. The individuals in the detention center receive case management aftercare planning and follow-up on community resources.

In addition, PATH is used in conjunction with other funding streams to support a comprehensive mental health services program in our detention center. This program includes a full-time mental health professional, 24/7 availability of psychiatry, incorporating the use of telemedicine, substance abuse evaluation and treatment services, linkage to community based case management services, the HUD Shelter Plus Care Housing Program and other housing assistance programs. At this time we are exploring additional funding to meet the growing needs of individuals at the detention center.

c. Community organizations that provide key services (e.g., primary health, mental health, substance abuse, housing, employment) to PATH eligible clients and describe the coordination with those organizations.

Emergency Housing—Three Oak's Men's Center, Angel's Watch Regional Women's and Children's Shelter, Leah's House, WARM—a faith based sheltering program and limited sheltering by the local Department of Social Services.

Transitional Housing—Three Oak's Men's Center, Angel's Watch Regional Women's and Children's Shelter, Leah's House, Marcey House and Compass (substance abuse treatment facilities), and Residential Rehabilitation Programs administered through Rock Creek Foundation and Pathways.

Permanent Supportive Housing—HUD Shelter Plus Care, DSS Project Home and Adult Foster Care, Charlotte Hall Veteran's Home, Cedar Lane.

Permanent Housing—Section 8 Vouchers, Rapid Re-Housing Initiative Vouchers, Home Ownership and Rental Assistance Programs administered through the St. Mary's County Housing Authority and the Home Ownership Program administered through the Tri-County Community Action Team.

Mental Health Services—St. Mary's Hospital provides emergency psychiatric services and stabilization on an acute and partial hospitalization basis, Mental Health Case Management, and crisis beds for adults administered through the Southern Maryland Community Network. Outpatient service providers include: Pathways and the Center for Children. Tele-Psychiatry was introduced this year into the community and is currently available at Pathways Clinic. Psychiatric rehabilitation programming includes: Day programming and off-site support services through Pathways and TRICO Mental Health, residential rehabilitation through Pathways and the Rock Creek Foundation, In-Home Intervention for Adults by Pathways and for Children by the Southern Maryland Community Network.

Substance Abuse Services—Walden-Sierra, Inc. provides a full array of outpatient services including urinalysis, intensive outpatient, counseling both in individual and group sessions, and relapse prevention. Walden also has a 28-day inpatient treatment facility. Certified Counseling Services provides outpatient counseling in both group and individual sessions. The county owns and operates a transitional housing facility, Marcey House. On Our Own of St. Mary's provides dual diagnosis support groups and AA/NA meetings. We also have multiple AA/NA and Al-Anon meetings occurring weekly around the county.

Developmental Disability Services—Resource Coordination, United Cerebral Palsy, the ARC, the Center for Life Enrichment and the Center for L.I.F.E all work to assist/support those with a developmental disability.

Medical Services—St. Mary's Hospital, Greater Baden Medical Services, Health Connections Van, the Health Department, and various private practitioners.

Employment/Education Services—Dept. of Rehabilitation Services (DORS), Supported Employment Services for those with a mental illness is provided through Pathways, the Kennedy Institute, Adult Education Services through the Public Schools, the Literacy Council, and the Community Development Corp also known as Jobs Connections.

Entitlements and Emergency Services—Local Dept. of Social Services, Hope, Catholic Charities and various other faith based charitable organizations.

Peer-to-Peer Programming—On Our Own of St. Mary's is offering peer support and wellness services including, Wellness and Recovery Action Planning (WRAP).

Soup Kitchen's/Food Banks—Mary's Song Soup Kitchen, All Saint's Soup Kitchen, 10 food pantries county-wide and a host of other non-profit agencies in the community.

Linkage to these services can be provided by case management, the outreach staff and by the detention center staff.

The DHS is working to facilitate an integrated network of services to improve conditions for people in need with a major focus on increasing the local authority to plan, implement and monitor human services. The DHS is bringing together local agencies, providers, consumers of services, other public and private entities and community representatives to empower local stake holders in addressing the needs and setting priorities for St. Mary's County. This is being done via the Health and Human Services Council of St. Mary's which was established to provide direction for the department as well as to enhance the quality of life for all St. Mary's County residents through a coordinated and integrated system of care. The Council has been working on a strategic plan which is to focus on four key strategies: transportation, housing, behavioral health and employment. The work of the Council is also the work of the DHS, which includes the development of consistent evaluation, reporting and monitoring criteria for all grants to ensure accountability, critical evaluation of new and existing programs to ensure coordination, the promotion and support of system evaluation and development in order to enhance effectiveness and reduce the costs of providing human services. The Council includes approximately twenty members representing a broad cross section of community agency leaders, consumers, non-profit agencies, the business community and law enforcement. It is planned that the Council will develop recommendations to submit to our Board of County Commissioners that will positively impact all human services in our community.

d. Gaps in the current service system.

Affordable housing, emergency shelter, transitional housing and access to care continue to be major gaps in the continuum of care for the homeless/mentally ill population in St. Mary's. PATH funds are currently used to support mental health services and case management for the homeless at the detention center and in the community; however, the transition from homelessness continues to be problematic due to waitlists for housing and the lack of qualified mental health professionals available in the community. The DHS is continuing to work to address workforce development initiatives including the use of technology to fill gaps, collaboration and the development of urgent mental health services for the homeless and those being released from incarceration. Our attentions in FY 10 have been focused on the further development and coordination of a Co-Occurring capable system.

- e. **Services available for clients who have both a serious mental illness and substance abuse disorder.**

At the Three Oaks Center, substance abuse service providers, mental health providers and the PATH funded outreach and case aide staff all work onsite, therefore consumers identified with a co-occurring disorder by outreach staff can be linked immediately to the appropriate staff. The St. Mary's County Detention Center, which is increasingly being recognized as an important intake and treatment point for all behavioral health services, a mental health professional certified in addictions and a psychiatrist work closely to treat and when necessary encourage a referral to the in-house substance abuse provider. Both inpatient and outpatient substance abuse treatment services are available to consumers with co-occurring disorders in the county through Walden-Sierra.

- f. **Strategies for making suitable housing available to PATH clients (e.g., indicate the type of housing usually provided and the name of the agency that provides such housing).**

Individuals who are enrolled in PATH have the potential to access HUD Shelter Plus Care Housing through the DHS, Section 8 rental assistance and rapid re-housing vouchers through the St. Mary's County Housing Authority. Additionally, Three Oaks Center, Leah's House and Angel's Watch provide emergency shelter and alternative transitional housing options based on income and/or disability which are funded by an array of HUD and other housing grants. PATH also provides for security deposits to help those with a criminal history access housing in the community, with the support of Case Management Services. The DHS is continuing to monitor housing trends quarterly and has completed a 3 year strategic community action plan to address homelessness in our jurisdiction.

4. Describe the participation of PATH local providers in the HUD Continuum of Care program and any other local planning, coordination or assessment activities.

The DHS contributes data utilized in the development of the HUD Continuum of Care to ensure that maximum funding from housing resources and opportunities are available for county residents. The Three Oaks Center spearheads the coordination, development and submission of the local HUD Continuum of Care. The DHS co-chairs the local Homeless Prevention Board and regularly partners with other agencies to address the development and better coordination of the homeless serving system. The Health and Human Services Council also contains representation from our local service providers to the homeless. Most recently the DHS participated in the 2010 Point In Time Survey in St. Mary's and gave grant monies to each of the shelters to support existing services to those in need during this challenging economic time.

5. Describe: (a) the demographics of the client population; (b) the demographics of the staff serving the clients; (c) how staff providing services to the target population will be sensitive to age, gender and racial/ethnic differences of clients; and (d) the extent to which staff will receive periodic training in cultural competencies.

Of the PATH population served in St. Mary's County in FY 09, 75% were identified as having co-occurring substance abuse and mental illness. Approximately 54% were identified as having Affective Disorders, while only 18% were identified as having Schizophrenia or other Psychotic Disorders. In FY 09, 91% of those served were male and 9% were female. In FY 09, 406 persons were outreached and 76 individuals were enrolled in PATH as a result of the outreach. Of those enrolled, 80% were Caucasian, 16% were African American.

PATH providers employ diverse staff whose demographics mirror the cultural composition of those they serve. In FY 09, one PATH staff member was a Caucasian female, and one PATH staff member was an African American male, both of which were certified in addictions. Staff provides services to those that are homeless/mentally ill and work diligently to provide linkages that are culturally sensitive and that accommodate individual choice or family, age, gender, religious preferences. The personnel assigned to work with PATH are required to participate in all pertinent state trainings and are offered training opportunities locally to develop their skill base. The DHS and the Mental Hygiene Administration continue to sponsor regular trainings on Stigma, Mental Health First Aide, Illness Management, Wellness and Recovery, Crisis Prevention and Intervention and Cultural Competency that both the DHS and PATH personnel attend.

6. Describe how persons who are homeless and have serious mental illnesses and any family members will be involved at the organizational level in the planning, implementation, and evaluation of PATH funded services. Also, are persons who are PATH eligible employed as staff or as volunteers? Do persons who are PATH eligible serve on formal advisory boards?

The DHS completes on-going needs assessments in the community which include focus groups and listening forums to incorporate the opinions of those we serve in planning. The Three Oaks Center does employ those that were formally homeless as shelter staff and those individuals offer peer support to those currently enrolled in PATH. Additionally, On Our Own of St. Mary's, Inc., a peer support and wellness center, plays a key role in planning as well as support services to the jurisdiction. On Our Own of St. Mary's, Inc. is a peer operated and run organization, which focuses on those who have co-occurring disorders and are in recovery. Our Health and Human Services Council does have consumers that serve as members; both consumers that have received services themselves and family members of those that have received services. We continue to strive to include the voices of those that have been homeless/mentally ill so that services are designed and implemented to reflect their needs and the needs of their families.

7. Provide a narrative that provides details regarding PATH Federal and match (i.e., State and local) funds.

POSITION	ANNUAL SALARY	PATH FUNDED FTE	PATH FUNDED SALARY	TOTAL
Mental Health Case Manager	\$64,221	0.15	\$26,000	\$26,000
Homeless Outreach	\$13,950	0.6	\$13,950	\$13,950
Fringe				
Travel				
Equipment				
Supplies				
Contractual—Telepsychiatry	\$91,000	0.01	\$5,000	\$91,000
Construction				
Other/Housing Assistance	\$1,000		\$1,000	\$1,000
Total Direct Costs	\$170,171		\$45,950	\$131,950
Indirect Cost	\$0		\$0	\$0
TOTALS	\$170,171	0.76	\$45,950	\$131,950

8. Indicate at least three outcome goals you will use to measure the effectiveness of PATH funded services. (State requirement)

- Increase the number of homeless persons contacted by 3%, utilizing outreach.
- Increase the percentage of contacted homeless persons with serious mental illness who become enrolled in services by 5%.
- Increase the percentage of enrolled homeless persons who receive community mental health services by 5%.
- Maintain the average federal cost of enrolling a homeless person with a serious mental illness in services.

Washington County Intended Use Plan

WASHINGTON COUNTY MENTAL HEALTH AUTHORITY

Washington County Projects for Assistance in Transition from Homelessness (PATH) Intended Use Plan Federal Fiscal Year 2010 (State FY 2011)

1. Provide a brief description of the provider by organization, name, type of organization, services provided by the organization and region served.

A. The Washington County Mental Health Authority (WCMHA), the Core Service Agency for Washington County, subcontracts with Turning Point of Washington County (TPWC) to provide PATH services. TPWC is licensed as an Assertive Community Treatment Program, Psychiatric Rehabilitation Program, Residential Rehabilitation Program and Supported Employment Program. Washington County is a predominantly rural county with Hagerstown being the largest city. Hagerstown is situated at the intersection of two major transportation arteries, Interstates 81 and 70. Additionally, there is a major Department of Corrections complex as well as a Veterans Administration Hospital in the vicinity. These factors contribute heavily to the influx of homeless individuals that pass through or stay in Washington County.

2. Indicate the amount of PATH funds the organization will receive.

A. WCMHA will receive \$37,000 in PATH funds for individuals who are homeless and have a mental illness.

3. Describe the organization's plan to provide coordinated and comprehensive services to eligible PATH clients, including:

A. a. Projected # of clients to be served in FY 2009 - 350 consumers (based on a 3 year average) would receive screening and assistance with basic needs. Of these 350 consumers, approximately 175 consumers, or 50 % would be enrolled in the PATH Program (based on historical data). Of the 350 consumers who receive some type of service, approximately 70% would be projected to be "literally" homeless.

b. Services to be provided - the primary focus will be to provide outreach services to identify homeless individuals with mental illness to assist them with basic needs such as food, shelter and clothing. As relationship development and engagement warrant, these services will also be provided: screening and obtaining previous treatment histories; determination of entitlement eligibility and procurement; and referrals for primary health services (mental health and somatic), relevant housing services, supported employment, job training, and educational services.

c. Community organizations that provide key services to PATH eligible clients and coordination with those organizations - The larger community providers serve the highest number of individuals in this population. These providers include: The Mental Health Center of Western Maryland - outpatient treatment, psychiatric rehabilitation, mobile treatment, and a grant funded residential program located in care provider homes; Behavioral Health Services of Washington County Hospital - inpatient and partial hospitalization, outpatient treatment; Turning Point, in addition to the PATH-funded Homeless Outreach Program, provides Assertive Community Treatment (ACT), psychiatric rehabilitation, vocational rehabilitation, residential rehabilitation, Integrated Dual Disorders Treatment and the Jail Mental Health Program; Potomac Case Management Services provides an array of case management options; A trauma

treatment program (TAMAR) is provided to inmates at The Washington County Detention Center through a contract with the Washington County Health Department; Brook Lane Health Services; Behavioral Health Services of QCI; and Contemporary Therapeutic Services are other mental health providers frequently serving this population. Additionally, the Washington County Department of Social Services, while not a mental health provider, serves this population by providing housing through Cares for Homeless, Project Home beds dedicated to individuals who are homeless, including those with mental illness. WCMHA also currently has 25 Shelter Plus Care slots for individuals who are homeless, have a mental illness and involvement with the criminal justice system.

d. Gaps in the current service system: The most significant service gaps continue to be adequate housing for the homeless. This need has been identified as a high priority in Washington County's Continuum of Care for HUD submission. WCMHA continues to work with service providers to increase the number of individuals in mental health residential placements who move to less intensive community placements, thus creating vacancies more frequently. Systemic demands and timelines for entitlement eligibility determination are difficult to meet given the inherent problems with this group of consumers. Consequently, the budgetary restraints on uninsured coverage impacts homeless consumers significantly.

e. Services available for clients who have both a serious mental illness and substance use disorder: Turning Point, a Program of Way Station, Inc., Has begun the implementation of Integrated Dual Disorders Treatment (IDDT), an evidence based practice endorsed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). The Homeless Outreach Case Manager is the coordinator for IDDT in Washington County. An Addiction Counselor has been hired by the Washington County Health Department Substance Abuse Division, a partner with Turning Point in the IDDT implementation and is assigned to Turning Point's facility. The key component of IDDT is the provision and integration of comprehensive mental health and substance abuse treatment services. These components will be implemented through comprehensive service delivery using motivational and stage-wise interventions, contractual relationships that establish Turning Point as the single lead agency, and the capability of providers to meet and participate frequently as multi-disciplinary treatment teams. For those consumers who are not willing to participate in IDDT, referrals can be made to other outpatient mental health clinics that offer dual diagnosis programs. Additionally, referrals to inpatient addiction treatment can also be made when it is clinically indicated and recommended by the addiction treatment team. The Washington County Health Department's Division of Addiction Services also provides treatment to an indigent population.

f. Strategies for making suitable housing available to PATH clients – WCMHA participates with other community organizations to develop strategies and reduce barriers to assist in making suitable housing available to PATH clients. The WCMHA continues to host the weekly Community Planning Team, with service providers and housing representatives coming together to discuss housing and treatment options for this population. WCMHA is also represented on the Washington County Task Force on Homelessness. The Homeless Outreach Worker is instrumental in assisting PATH clients to access suitable housing by discussing various options based on current openings and the needs of the individual. The most readily available, suitable housing options for the homeless population have been the following:

Section 8 (Hagerstown City and Washington County): HUD subsidized housing offers a long-term option with the highest level of independence, especially for individuals who have no criminal justice involvement. Supported housing services are typically provided to increase the

likelihood of success in the community.

Residential Rehabilitation Program: Turning Point of Washington County provides approximately 32 RRP beds in Hagerstown. Since entering into a census reduction initiative with the Mental Hygiene Administration in FY 08 and 09, vacancies rarely occur in the program.

DSS Project Home: Washington County DSS currently operates nearly 60 Project Home beds. Typically these beds are full. At the end of FY1999, DSS received a grant to expand the number of Project Home beds, specifically for individuals who are homeless. The Homeless Outreach Case Manager has regular contact with DSS to discuss availability, appropriateness of referrals, etc.

Shelter Plus Care: The Homeless Outreach Worker makes referrals to Shelter Plus Care when an eligibility criterion is met. Referrals to this program are also made by other community organizations.

Community Action Council's Transitional Living Program: There are a limited number of rooms at a local hotel that are subsidized for transitional living until the homeless consumer is able to acquire the appropriate entitlements to secure longer-term arrangements.

4. Describe the participation of PATH local providers in the HUD Continuum of Care Program and any other local planning, coordinating or assessment activities.

A. The Homeless Outreach Case Manager is the Co-Chairperson of the Washington County Homeless Task Force, the focal group for the development of the HUD Continuum of Care. Through that involvement, the Homeless Outreach Case Manager coordinates community services appropriate to homeless needs such as: Community Action Council Case Management/Transitional Housing Program; Shelter + Program; CARES for Homeless Project Home Program through DSS; REACH, a faith-based private non-profit providing crisis intervention and cold weather shelter for the homeless; Housing Opportunities for People Living with AIDS through the Washington County Health Department and DSS; and with temporary housing/shelter arrangements financed through DSS, CAC, and REACH. The Homeless Outreach Case Manager also has participated in the planning and development of the Homeless Management Information System.

5. Describe: (a) the demographics of the client population; (b) the demographics of the staff serving the clients; (c) how staff providing services to the target population will be sensitive to age; gender and racial/ethnic differences of clients, and (d) the extent to which staff receive periodic training in cultural competence?

A. The majority of homeless individuals in Washington County are white males in the 30 to 50-age range although there has been an increase of women and families identified over the past year. Both Homeless Outreach staff are young females which has compromised their ability to meet individuals at more "off the beaten path" locations due to safety issues. However, with the inclusion of the Cold Weather Shelter in the continuum of services for homeless, the Homeless Outreach staff are able to meet homeless individuals in a safe, secure environment and provide interventions and resources that are appropriate to their needs. The organizations that most of the homeless have gone to for assistance are very familiar with the Homeless Outreach staff and referrals have been very appropriate. Ethnic diversity has not been an issue. Knowledge about the "homeless culture" and its unwritten rules is something that is obtained through working directly with that population. All TPWC staff participates in the organization's annual cultural sensitivity training. In addition, the Homeless Outreach Program staff will be encouraged to

attend cultural diversity training such as those offered by the Mental Hygiene Administration.

6. Describe how persons who are homeless and have serious mental illnesses and any family member will be involved at the organizational level in the planning, implementation, and evaluation of PATH-funded services. Also, are persons who are PATH-eligible employed as staff or as volunteers? Do persons who are PATH-eligible serve on governing or formal advisory boards?

A. Homeless Outreach consumers are able to provide their assessment of services received through the service. Results have indicated that consumers are highly satisfied with the staff and program and with their assistance to obtain mental health services. The results of a previous survey were incorporated into the program planning and implementation steps, resulting in the creation of and hiring for the Outreach Assistant position. Consumers and family members serve on the Board of Directors of Turning Point of Washington County and have input into evaluating the mission of the organization and subsequent services provided.

7. Provide a budget narrative that provides details regarding PATH Federal and match (i.e., State and local) funds.

POSITION	ANNUAL SALARY	PATH FUNDED FTE	PATH FUNDED SALARY	TOTAL
Outreach Worker	13,000	0.5	13,000	26,000
Specialist	11,480	0.65	21,321	32,801
Fringe	1,909		2,679	4,588
Travel	3,000			3,000
Equipment				
Supplies	9,000			9,000
Contractual				
Construction				
Other/Training				
Total Direct Costs	38,389		37,000	75,389
Indirect Cost	11,611		0	11,611
TOTALS	50,000		37,000	87,000

8. Indicate at least three outcome goals you will use to measure the effectiveness of PATH funded services. (State requirement)

A. The following measures have been established for the Homeless Outreach program:

Number of individuals served (received basic needs) - 350

Number of individuals who become enrolled in homeless outreach services – 175

Number of enrolled homeless persons who receive community mental health services – 60

Number of individuals residing in long-term housing (6 months occupancy) – 15

These outcomes have steadily increased over the past 3 years indicating not only a need for the service but its effectiveness in identifying and linking homeless individuals in Washington County.